County of San Diego Monthly STD Report

Volume 13, Issue 10: Data through May 2021; Report released November 3, 2021.





Table 1. STDs Reported Among County of San Diego Residents, by Month and
, , ,
Previous 12 Months Combined.

		2020	2021 Previous 12-		
		Previous 12-			
	May	Month Period*	May	Month Period*	
Chlamydia	1219	21024	1469	18005	
Female age 18-25	495	7872	528	6714	
Female age ≤ 17	44	760	54	613	
Male rectal chlamydia	51	1174	106	1328	
Gonorrhea	357	6119	690	7301	
Female age 18-25	63	995	111	1112	
Female age ≤ 17	14	105	14	133	
Male rectal gonorrhea	29	700	111	1095	
Early Syphilis (adult total)	82	1080	100	1239	
Primary	17	157	10	196	
Secondary	28	355	34	421	
Early latent	37	568	56	622	
Congenital syphilis	0	20	3	18	

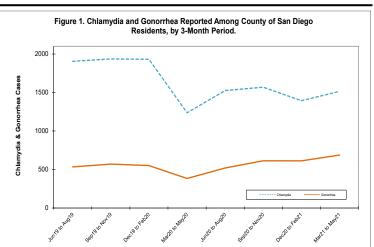
* Cumulative case count of the previous 12 months.

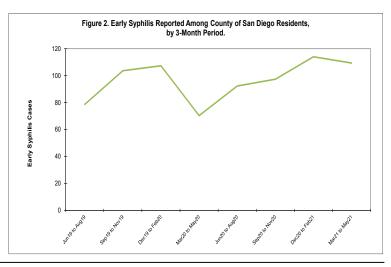
Table 2. Selected STD Cases and Annualized Rates per 100,000 Population for San Diego County by Age and Race/Ethnicity, Year-to-Date.

San Diego County by Age and Race/Ethnicity, Year-to-Date.											
	All R	aces*	Asian/PI		Black		Hispanic		White		
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate	
All ages											
Chlamydia	7324	524.4	181	98.3	246	350.5	669	146.8	847	134.6	
Gonorrhea	3317	237.5	97	52.7	284	404.6	531	116.6	633	100.6	
Early Syphilis	554	39.7	31	16.8	58	82.6	236	51.8	183	29.1	
Under 20 yrs											
Chlamydia	1136	314.4	20	50.0	39	222.3	102	67.3	135	102.8	
Gonorrhea	306	84.7	6	15.0	21	119.7	37	24.4	39	29.7	
Early Syphilis	5	1.4	0	0.0	1	5.7	2	1.3	1	0.8	
Note: Rates are calculated using 2019 Population Estimates: County of San Diego, Health											

Note: Rates are calculated using 2019 Population Estimates; County of San Diego, Health and Human Services Agency, Public Health Services Division, Community Health Statistics Unit. 6/2020.

Note: All data are provisional. Case counts are based on the earliest of date of diagnosis, date of specimen collection, and treatment date. Totals for past months might change because of delays in reporting from labs and providers.





Editorial Note: Management of Suspected Gonorrhea Treatment Failure

Gonorrhea is the second most common reportable sexually transmitted infection in the United States and a major public health concern due to the ability of *Neisseria gonorrhoeae* to rapidly develop resistance to antibiotics [1]. Recently, the California Department of Public Health (CDPH) published <u>Clinical Guidelines for Gonorrhea Treatment and Management of Suspected Treatment Failure</u> that outline: 1) clinical criteria for suspected gonorrhea treatment failure based on persistent symptoms or positive test-of-cure (TOC); 2) recommended steps for management when gonorrhea treatment failure, rather than reinfection, is suspected; and 3) resources for *N. gonorrhoeae* culture and antimicrobial susceptibility testing (AST)(local resources are described on page 2 of this report). Briefly, the following steps should be taken when gonorrhea treatment failure is suspected:

- Obtain specimens for culture <u>and</u> nucleic acid amplification testing (NAAT) prior to retreatment.
- Treat with either: 1) ceftriaxone 1 gram IM <u>plus</u> azithromycin 2 grams orally **OR** 2) gentamicin 240 mg IM <u>plus</u> azithromycin 2 grams orally (for cephalosporin allergy). Due to poor efficacy of gentamicin against pharyngeal gonorrhea [2][3], regimen #1 should be used whenever possible for suspected pharyngeal gonorrhea treatment failure.

County of San Diego STD Clinics: www.STDSanDiego.org

Phone: (619) 692-8550 Fax: (619) 692-8543

STD Clinical Consultation Line: (619) 609-3245 (8am-5pm, M-F)



Provider STD Reporting: (619) 692-8520; fax (619) 692-8541 Sign up to receive Monthly STD Reports, email STD@sdcounty.ca.gov

 $^{^{\}star}$ Includes cases designated as "other," "unknown," or missing race/ethnicity

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Editorial Note (Continued):

- <u>Report cases</u> of suspected gonorrhea treatment failure to the HIV, STD, and Hepatitis Branch (HSHB) of Public Health Services within 24 hours.
- Test all sexual partners in the last 60 days at all sites of exposure and treat them empirically with the same treatment regimen that the patient receives.
- Perform TOC with culture <u>and NAAT</u> seven days after treatment of urogenital/rectal infection and 14 days after treatment of pharyngeal infection.
- Contact HSHB by calling (619) 609-3245 with questions regarding management of suspected treatment failure or mandated reporting.

No-cost AST for ceftriaxone, cefixime, and azithromycin is available through the Maryland Public Health Laboratory (MDPHL), which is part of the Centers for Disease Control and Prevention's Antibiotic Resistance Lab Network (ARLN). Information about this service is available at https://health.maryland.gov/laboratories/Pages/ARLNHome.aspx. The San Diego County Public Health Laboratory will forward specimens from suspected gonorrhea treatment failure cases to the MDPHL on behalf of the requesting provider. For assistance in obtaining AST or obtaining N. gonorrhoeae cultures, please call (619) 609-3245.

For referrals to the main County of San Diego STD Clinic, where ceftriaxone, gentamicin, and *N. gonorrhoeae* cultures are available onsite, providers should call (619) 692-8501. To expedite referral, please specify that the reason for referral is suspected gonorrhea treatment failure.

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